



For Office Use Only:

Tag #: _____

Issued By: _____

Date: _____

SIGN UP FORM FOR NON-RESIDENTS

The Green Dog Program is an optional program that allows participants to take their dog(s) off-leash during designated hours at many parks across the Town of Brookline. See brochure for further information.

Owner Name: _____

Address: _____

Phone (Home): _____ (Work): _____ (Other): _____

E-mail Address: _____

Providing an e-mail is strongly recommended for receiving program updates. We will not share your information.

Dog Name: _____ Sex (M/F): _____ Spayed/Neutered: _____

Breed: _____ Color: _____ Age: (Years) _____ (Months) _____

Dogs must be at least 6 months old to participate in the off-leash program.

Dog License #: _____ Rabies Tag #: _____

Dogs must be licensed and have a current rabies vaccination to participate in the off-leash program.

In addition, Massachusetts state law requires that all dogs over 6 months are licensed every year.

Non-residents must provide a copy of current license and a copy of current rabies vaccination.

Rabies Vaccination Issued On: _____ Expires On: _____ Micro Chip #: _____

Name & Address of Veterinarian: _____

Green Dog Program Annual Fees

Non-Resident Fee per Dog \$100

Fees cover the calendar year. Tags will expire at the end of December and must be renewed for the following year. All dogs must be registered for the program to participate, including dogs being taken off-leash by dog walkers. Dog owners are responsible for registering individual dogs for program.

- Non-residents will receive a Green Dog tag, which must be worn by dog in addition to current dog license tag.

DOG OWNER'S SIGNATURE: _____ DATE: _____

Signed under the penalties of perjury. Signature is required and indicates that the information you have provided is accurate and complete, that you agree to follow program rules and regulations, including that any dog that exhibits overly-aggressive behavior may be removed from the program without refund, and that you agree to forever release, acquit, discharge and covenant to hold harmless the Town of Brookline from any and all claims and rights of action or damages as a result of participation in this program.

See reverse side

ADDITIONAL DOG INFORMATION (if applicable)

Dog #2:

Dog Name: _____ Sex (M/F): _____ Spayed/Neutered: _____

Breed: _____ Color: _____ Age: (Years) _____ (Months) _____

Dogs must be at least 6 months old to participate in the off-leash program.

Dog License #: _____ Rabies Tag #: _____

Dogs must be licensed and have a current rabies vaccination to participate in the off-leash program.

In addition, Massachusetts state law requires that all dogs over 6 months are licensed every year.

Non-residents must provide a copy of current license and a copy of current rabies vaccination.

Rabies Vaccination Issued On: _____ Expires On: _____ Micro Chip #: _____

Name & Address of Veterinarian: _____

Dog #3:

Dog Name: _____ Sex (M/F): _____ Spayed/Neutered: _____

Breed: _____ Color: _____ Age: (Years) _____ (Months) _____

Dogs must be at least 6 months old to participate in the off-leash program.

Dog License #: _____ Rabies Tag #: _____

Dogs must be licensed and have a current rabies vaccination to participate in the off-leash program.

In addition, Massachusetts state law requires that all dogs over 6 months are licensed every year.

Non-residents must provide a copy of current license and a copy of current rabies vaccination.

Rabies Vaccination Issued On: _____ Expires On: _____ Micro Chip #: _____

Name & Address of Veterinarian: _____

**Remember to include check or money order payable to the Town of Brookline for appropriate fee.
Fees are \$100 per dog for non-residents.**

Non-residents must also include copy of current license and current rabies vaccination for each dog.

**Return forms and payment to:
Green Dog Program
c/o Town Clerk's Office
333 Washington Street
Brookline, MA 02445**

Please contact us with any questions at (617) 879-5650 or visit www.brooklinema.gov/GreenDog